PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

200309497-1

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
TOTAL CLAIMS			(Column 1)		(Column 2)		1	TYPE		OR		SMALL ENTITY	
TOTAL CLAIMS			36			<u> </u>		RATE	FEE	_ ՝	RATE	. FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			36 minus 20=		·16.			X\$ 9=		OR	X\$18=	288	
INI	DEPENDENT C	LAIMS	7 minus 3 =		4			X43=		OR	X86=-	344	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR.	+290=	- 1 -	
* If the difference in column 1 is less than zero, enter "(column 2	•	TOTAL		OR	TOTAL	1402	
	· C				4	OTHER	THAN						
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	1	X\$ 9=	·	OR	X\$18=		
AME	Independent	*	Minus	***	• .	=		X43=		OR	X86=		
	FIRST PRESE		+145=			+290=							
								TOTAL		OR	TOTAL		
		A	DDIT. FEE		OR,	ADDIT. FEE							
	·	(Column 1) CLAIMS		(Colum		(Column 3)	ŀ		4551				
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE [*]	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		= .		X43=		OR	X86=		
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
								+145=		OR	+290=	· •	
			•	Al	TOTAL DDIT, FEE		OR ,	TOTAL DDIT. FEE					
		(Column 1)		(Colum	n [.] 2) .	(Column 3)			• •		•		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	Γ	X\$ 9=		OR	X\$18=	·	
	Independent	*	Minus	***		=	上	X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	7.00-		
	the entry in anti-	L	+145=		OR	+290=							
** 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter."3."									OR A	TOTAL DDIT, FEE		
T	i the inignest Num	nber Previously Pa ber Previously Paid	id For IN THIS For (Total or	SPACE is Independen	less than It) is the I	i 3, enter.*3.* highest number		DIT. FEE L	opriate box				